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	Divísion of Co	rporations		
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From:				
	Account Name	: CAPITOL CORPORATE SERVICES, INC.	-4	
	Account Number	: 120160000048	** *	
	Phone	: (800)345-4647	<u>:-</u> .	
	Fax Number	: (800)432-3622		
			<u>မာ့</u>	
Enter th	ne email address	for this business entity to be used for	future	

## LLC REGISTERED AGENT CHANGE TRIDENT REAL ESTATE INVESTMENTS-WISE, LLC

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of TRIDENT REAL ESTATE INVESTMENTS-WISE, LLC 1. Name of the Limited Liability Company: 2. (a) 4414 Massachusetts St (b) 4414 Massachusetts St Mailing address of limited liability company: Principal office address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) ORLANDO, FL 32812 ORLANDO, FL 32812 M19000007640 08/08/2019 3. Date of filing/registration in Florida Document number 5. (a) CAPITAL CORPORATE SERVICES LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 515 EAST PARK AVENUE, 2ND FLOOR TALLAHASSEE FL 32301 (b) Capitol Corporate Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: 515 East Park Avenue 2nd Fl **NEW** Registered Office Address: Tallahassee FL 32301 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the changes are mode, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the stricles of organization or the operating agreement of the limited liability company arder theis of a momber or authorized representative of a member Printed or typed name of signer Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, If this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. - Brelietes Brian Radecki, Assistant Secretary on Signature of Registered Agent behalf of Capitol Corporate Services, Inc. Division of Corporations P.O. Box 6327 Taliahassee, FL 32314 FILING FEE: \$25.00

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